



USA HOCKEY
STUDENT COACH INFORMATION FORM



This form is designed to comply with requirements of USA Hockey governing the use of minors under the age of 18 as student coaches on a registered hockey team. See the USA Hockey Annual Guide for complete information regarding Student Coaches (Rules & Regulations, VII. Coach Registration, B. Under-Age Coaches).

STUDENT COACH INFORMATION: Hockey Season: 2023 through 2024

Association Name: Centennial Youth Hockey Association **USA Hockey District:** ISD #12 – District 10

Team Student Coach will help Coach: _____

Team's Level Of Play: _____ Boys Girls

Student Coach Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Birthdate: ____/____/____

E-mail Address: _____

Team where Student Coach is registered as a player: _____

Level of play or classification of team where student coach is a player: _____

Head Coach of the Receiving Team: Signature of the head coach where the player will be a student coach

_____ Required Signature _____ Printed Name

AUTHORIZATIONS:

The above named Student Coach is authorized to participate with the above named team, under adult supervision by the regular coaching staff, for the season indicated. We certify that we have granted our permission for this participation, that the student is properly registered with USA Hockey, and that the team and association will comply with other provisions of the Student Coach rule.

Parent and Head Coach Signatures are required prior to submission to CYHA

May be submitted to CYHA without Association Representative Signature

PARENT/ GUARDIAN	HEAD COACH <i>(team on which student is a player)</i>	ASSOCIATION REPRESENTATIVE
_____ <i>Signature</i>	_____ <i>Signature</i>	_____ <i>Signature</i>
_____ <i>Printed Name</i>	_____ <i>Printed Name</i>	_____ <i>Printed Name</i>

All signatures must be in original ink - no photo copies or faxes accepted.